

THE

MEDICAL COUNCIL FOR 1862:

ITS DOINGS AND UNDOINGS.

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MDCCCLXII.

*Minutes of the General Council of Medical Education and
Registration for 1862.*

AN observer of the proceedings of the Medical Council, from its first institution until the present time, who would take the trouble to strike a balance between its cost and its results, might well adopt the exclamation of Prince Hal on the discovery of the fat knight's tavern bill—"Oh, monstrous! but one halfpenny-worth of bread to all this intolerable deal of sack!"

We were never great admirers of the Medical Act. It was a makeshift and an expedient; it did little more than relieve Parliament of what had become an intolerable nuisance—the perpetual cry for "Medical Reform;" it transferred all the professional jealousies and squabbles to another tribunal,—the Medical Council; and, in doing this, it withheld from that body any real and efficient power for composing those strifes by which the medical profession had long been torn asunder.

It did, however, and for that let us be ever grateful, destroy all exclusiveness of practice; and it declared, that a man who was qualified to watch over the health of the lieges north of the Tweed, might equally be trusted to do so on the south, or even within the magic circle of seven miles round London.

On the second day of its first meeting (24th November 1858), the Council fixed that the fee for registration to be paid by all those qualified before 1st January 1859, should be £2 sterling; and for those qualified after 1st January 1859, £5 sterling.

According to the Returns laid before Parliament in 1860, the Medical Council had realized, as the result of this, £34,511, 10s.

The English Branch Council had invested £20,000, the Scottish £2000, and the Irish £3120, 8s. 2d. The fees and travelling expenses of the members for meetings in that year amounted to £3286, 10s.

In 1861, the receipts from fees amounted to £3204, 10s. The expenses of meetings were £1794, 9s.

In 1862, the receipts from fees amounted to £4017, 15s. The expenses of meetings were £1821, 15s. The English Branch Council had invested another £1000, and the Irish Branch had realized £611, 9s. 2d. of the sum formerly invested by it.

The expense of the Council meeting, say for a seven days' sederunt, is as nearly as possible £185, 15s. per day, or about £46, 5s. per hour.

Surely, for sums so large, wrung from the anticipated earnings of a hard-worked and not overpaid profession, some very tangible benefits should be displayed.

Not that we by any means think the cost excessive. Many of the members of Council enjoy extensively the confidence of the public in their respective districts, and the remuneration which they receive for attending the meetings of Council is of the most meagre description. We are, however, entitled to inquire whether the results that have followed are fitted to recompense the members of Council for their loss of time, and the members of the profession for the large pecuniary demand made upon them?

The objects which the Medical Act was avowedly intended to accomplish were :—

1. Equal privileges of practice.
2. Equal excellence of education.
3. Equal stringency of examination.
4. The extrusion of unworthy members from the profession.
5. The publication of a national Pharmacopœia.

Beginning with the last of these, we may congratulate the profession and the public that, after four years' labour, this great national work is reported as complete, and in great part ready for the press.

It appears, however, that the Medical Act, which seems to have been complete in no one part, while enjoining on the Medical Council the publication of a Pharmacopœia,—a work necessarily involving enormous trouble, and very great expense,—made no provision to enable the Council to make contracts for its publication; so as to secure that body from the risk of pecuniary loss or piracy.

Further, in Ireland, the Dublin Pharmacopœia, published by the College of Physicians, is by statute the standard for that country; while, by an order of the Privy Council, the London Pharmacopœia is the standard in England. No section repealing these provisions was introduced into the Medical Act; so that pharmaceutic chemists, apothecaries, and all others will be still entitled to regulate their processes by the last edition of these works.

Becoming awake to these facts at the eleventh hour, the Pharmacopœia Committee have meanwhile delayed its publication; and the Council, by a deputation to the Home Secretary, endeavoured to induce Government to bring in a bill to remedy these defects in the Medical Act. As yet we have seen no mention of such a bill having been introduced into either House of Parliament; and it is evident that at this late period of the session, there is little chance of such a measure becoming law unless proceeded with immediately; so that there is every probability that another year may elapse before the work goes to press.

We are sorry to observe that very important changes are to be made in the system of weights and measures. According to these

changes, the drachm and grain will be about one-eleventh less in weight than they were, while the drachm will be nearly double, and the grain about an eleventh less than the drachm and the grain of the imperial standard.

This will give rise to a good deal of confusion at first, although ultimately it will be of benefit, as the drachm will now be the 8th part, and the grain the 480th part of the ounce.

The alteration of the nomenclature will also involve no little trouble on the publication of the new Pharmacopœia, as also will the alteration of the strength of various well-known and commonly-used preparations. Both these changes were, however, imperatively necessary, from the varieties which existed in the names and strength of preparations containing the same ingredients, as ordered in the three Pharmacopœias. One great improvement has been effected in this department, by "so framing the formulæ for the preparations and compounds that all articles under one Galenical form should admit of being fitly prescribed in the same dose. Difficulties of detail have prevented this convenient system from being carried out to the full extent; but it has been attended to as far as possible, and increased facility in prescription will be found to have been thus attained."

We wish any evidence had been afforded in the admirable Report of the Pharmacopœia Committee, which is printed in full in the first day's proceedings of the Council (14th May 1862), that the attempt to make medicines more palatable had engaged their attention. This may seem much too small a matter to have engaged the attention of such learned Pundits, but we can assure them that the nauseous and repulsive character of many of our drugs was one cause of the favour with which at one time homœopathy was received. Many of the most disagreeable tastes are capable of being concealed or disguised,—a fact which seems to be utterly ignored in our Pharmacopœias, which appear to have been drawn up by persons having a profound contempt for the little weaknesses of humanity,—antimony, for example, which is a nearly tasteless drug, is made absolutely nauseous in antimonial wine, and numerous other examples of a similar kind might be adduced.

Having thus done full justice to the labours of the Medical Council in this department, we may be permitted to inquire whether the task assigned to it would not have been as well performed by the Colleges without its intervention, and whether, had the Medical Act enjoined that instead of three Pharmacopœias, one for each division of the kingdom, there should in future be but one of a national character, the Colleges would not have united for the production of one worthy of the name. Indeed, the Council was compelled to avail itself of extraneous assistance; and while, of course, it was fortunate in having in its own body such men as Christison, Apjohn, and Williams, it may be doubted how far the task would have been completed without the aid of Neligan, Maclagan, Seller, Garrod, Farre, and Squire.

Another point which we indicated as an object of the Medical Act was the removal of unworthy members of the profession from the Register. Various powers are conferred on the Council in this respect by the Medical Act.

1st, By Section xxviii. the General Council may order the removal from the Register of the name of any practitioner who has been deprived of the qualification on which he registered by the College or Body by which that qualification was conferred.

2d, Any registered practitioner convicted in England or Ireland of felony or misdemeanour, or in Scotland of any crime or offence, may have his name removed from the Register.

3d, Any registered practitioner, who may, after due inquiry, be judged by the General Council to have been guilty of infamous conduct in any professional respect, may have his name erased from the Register.

All these powers have been exercised by the Council in past years; but, during this session, the Council adopted the report of a committee appointed to consider the question, to the effect that the Council should not take part as prosecutors against persons accused of infamous conduct in a professional respect, but should sit as judges on prosecutions conducted either by individuals or public bodies.

The propriety of this is obvious. No doubt the Council is empowered by the Medical Act to act both as prosecutors and judges, but the law always regards with extreme disfavour the union of any two such offices; and the Council assuming this double character undoubtedly told against it in the case of Richard Organ, whose name was restored to the Register by a writ of mandamus after it had been struck off by the Council. Ultimately, indeed, the Council was successful in effecting the removal of his name from the Register, but not until there had been great expense incurred and great annoyance experienced from him and his legal advisers.

For the future, the various colleges and registration associations who have interest in preserving the purity of the Register can prosecute such parties before the Medical Council, which will then act purely as a court of inquiry in the case.

It will be well for bodies undertaking such prosecutions to be aware that the Council, in 1861, laid down certain regulations regarding them, which are contained in chapter viii. (page 10) of the Standing Orders.

All complaints are to be made, in the first instance, to the Branch Council of that part of the kingdom where the accused may reside. The Branch Council are to take the evidence and send a statement of it to the Register one month before the meeting of the General Council.

The Registrar may take a legal opinion, and, provided it be in favour of proceeding, may summon the accused to attend the meeting of the Council.

In the event of the legal opinion being against proceeding, the case shall be remitted to the Branch Council, with which it originated, to deal with as they may see fit.

At the same time, in order to facilitate the removal from the Register of the names of those who have been convicted in England or Ireland of any felony or misdemeanour, or in Scotland of any crime or offence, power was given to the Executive Committee to discharge the functions of the Council in this respect. This seems right and proper. To the Executive Committee has been intrusted from the first the superintendence of the publication of the Register, and in the discharge of that duty it seems to be the most proper body to remove from that Register the names of those who have been convicted of crime. The only decision vested in them is not the innocence or guilt of the party accused, nor even the nature or effect of the crime of which he is accused, but simply whether the evidence (usually a certified extract from the decision of the Court) is sufficient to prove his conviction. In such cases the sooner the name is removed from the Register the better, and without some power of the kind being intrusted to the Executive Committee, in default of a meeting of Council between the conviction of the offender and the publication of the Register, his name would again appear among legally qualified medical practitioners.

A curious question connected with this suggests itself to us. Suppose such a man were, at the termination of his sentence, to present himself for examination before any of the licensing bodies, and to produce evidence of having complied with all their requirements, would that body, even supposing it to be acquainted with the previous history of the applicant, which might or might not be the case, be entitled to refuse to take him on trial? Having taken him on trial, and he having satisfied it touching his knowledge, would it be entitled to refuse him its diploma? And, supposing he thus obtained his diploma, would any of the Registrars be entitled to refuse his name re-admission to the Register? These are questions which should be considered by the Council in regard to the new Act of Parliament for which it is proposed to apply.

We believe there is nothing in the actings of the Council which has so much disappointed the profession in England as the reluctance of the Council to conduct prosecutions. South of the Tweed the great desire was for a Medical Act to put down quackery,—a thing impossible to be obtained, and, in the present temper of the House of Commons, not very safe to be asked. It was considered were enough to declare, as the Act does, that only those registered were to be considered as legally qualified medical practitioners, or entitled to hold public medical appointments.

It was reserved, however, for the genius of a Scottish sheriff to decide, that in the case of a severe injury the knowledge of a professed bone-setter was superior to that of the President of the Faculty of Physicians and Surgeons of Glasgow. It seems the

peculiar function of this amusing legal functionary, on the one hand to make political vaticinations which never are fulfilled, and on the other to give oracular judgments which uniformly are reversed; nor was the one we have alluded to singular in this respect.

Speaking of the Register naturally leads us to a subject which seems annually to engage the attention of the Council, without any apparent beneficial result—the small demand for copies of that publication. The original blunder into which the Executive Committee of the Council fell, was undertaking to be their own publishers, and from the effects of this error they have never recovered. Of course, they have to contend in the market with the formidable rival carried on by Messrs Yearsley and Churchill, which is, as a work of reference, a much more useful companion to the library table.

An opportunity was last year afforded the Council of retracing their steps,—an offer having been laid before them by Mr Churchill, on terms which may be condensed as follows:—

The agreement to subsist for seven years. The Council to pay Mr Churchill £150 per annum; two shillings to be allowed the Council for every copy sold above 650, but the Council to pay nothing more should the sale fall below 650 copies. The price of the Register to be kept at four shillings as at present; but should it be agreed to raise the price, the Council to have a proportionate advantage.

On the whole, seeing that in the return to Parliament of the receipts and expenditure of the Medical Council as at January 1861, the expense of printing the Register is set down at £594, 1s. 10d., and the proceeds of its sale at £166, 2s., showing a loss of £427, 19s. 10d., and in 1862 the cost figures at £386, 18s. 2d., and the proceeds at £93, 8s. 6d., involving a loss of £293, 8s. 6d., it may be doubtful how far it was wise in the Executive Committee, to whom the offer was referred by the Council, to reject a proposal which would certainly have secured a wider circulation for the Register, and would have fixed the annual loss at a sum much below what it has ever yet been. It appears that in the important town of Halifax, with a population of about 40,000, a medical man prosecuting for fees for professional attendance was non-suited because a copy of the Medical Register could not be obtained in the town. The evil is no doubt great; the officials attached to all Courts ought to have copies of this official book, and the Council requested the President to draw the attention of the Secretary of State to the subject; it was also agreed that the Executive Committee should prepare a list of persons, public offices and public institutions, to whom free copies should be sent. It was farther proposed to remit to the Executive Committee to take steps to secure that copies of the Register be placed for sale in the hands of the principal booksellers in all towns in the United Kingdom where county courts and assize courts are held. This motion was rejected,—at which we are not surprised; for, in the first place, the

General Council could not compel booksellers to hold the work in stock ; and, in the second place, the knowledge of the fact that copies were at hand and could be purchased at any time, would tend still farther to restrict the already very limited demand for the book.

But, after all, the Medical Act having secured to all registered practitioners equality of practice throughout Her Majesty's dominions, the great duty of the Medical Council was to devise and secure the adoption of measures calculated to enforce equality of education and equality of examination, and it is in this that the most signal failure has been displayed.

It is well known that of some bodies, whose courses of study may look very complete on paper, and whose examinations may seem to be a sufficient test of the knowledge of the candidate, the regulations are so carelessly enforced, and the examinations are conducted in so perfunctory a manner, that the *idle* student finds in them a convenient postern for entering a profession, the main doors of which would assuredly be shut against him. To put a stop to such a system, not only was power given to the Medical Council to regulate within certain limits the education of all bodies, but the Medical Act (sect. xviii.) provides, that "any member or members of the General Council, or any person or persons deputed for this purpose by such Council, or by any Branch Council, may attend and be present at any such examinations." This clause, though permissive in language, is evidently intended, according to the usual reading of Acts of Parliament, to be enforced. Nor were the Council unmindful of their duty in this respect. In June 1860, the Education Committee appointed a sub-committee to consider the question of Visitation of Examination, and that sub-committee reported at the same meeting (see Minutes of Committee on Education for June 21, 1860). The Report, however, was not taken into consideration that session, but was discussed before the whole Council as a Committee of Education on the 1st July 1861. It was proposed, in this Report, to follow to some extent the Privy Council Scheme ; to appoint an Inspector of Examinations ; to allow him a salary and travelling expenses. The entire scheme was rejected, and up to this hour nothing has been proposed in its place ; so that this important duty of the Council has been virtually abandoned.

And in regard to the regulation of the course of study, the Council, at their second meeting (August 3, 1859), appointed a Committee on Education, which gave in its first Report on the 11th of August 1859.

Whether the plan adopted by that Committee, of laying down a minimum course of education, was, on the whole, the wisest that could be suggested, may be doubted, but such a plan having been sanctioned, it remained for all the bodies having representatives at the Medical Council to yield it a prompt and ready obedience. At first it seemed as if this was to be done, and congratulations were

heard on all sides of the improvement in education, already effected by the judicious "recommendations" of the Council.

The Education Committee, in their first Report, stated, and stated truly, that the preliminary general education for entrants into the medical profession was much more defective than the purely professional, and, accordingly, the chief efforts of the Council were directed to the improvement of that department; so that the minds of medical students being more sedulously cultivated before entering on their professional studies, might be the better prepared to receive and profit by the philosophical studies which a course of medical education implies. But the regulations of all the bodies were more or less tainted with those vicious considerations which regard medicine, or at least surgery, as a trade; and in some parts of the kingdom the vile system of apprenticeship, which dooms the victim to the employment of a shop and errand boy at a time of all others most important for acquiring general knowledge, was still flourishing. By this system, not only is the time of the student wasted, but he sees and prescribes for patients before he knows anything of disease, in many cases before he has even attended those instructions which inform him of the structure and functions of the human body; so that the very best means are taken to form a routine practitioner, following his profession empirically, the after-knowledge and after-science being seldom brought to bear on practice, rules for which he has picked up in the rough and ready manner we have described. We do not mean to say there may not be bright examples of talent and philosophy trained under such a system,—undoubtedly there are, but they are the exceptions that prove the rule. We do not mean to say that too much may not be attempted now-a-days by lectures, and that the student may possibly be left too little to his own guidance in the acquisition of knowledge. This is a question apart; but two things we do assert, that the apprenticeship system occupies the student with mechanical drudgery at a time when suitable education should be developing his mental powers, and plunges him in the mysteries of practice without a clue to guide him through the intricate labyrinths where he is doomed to wander.

A decided blow, then, was given to this system by the second recommendation issued by the Council in 1861, which commences as follows:—

"That the time of commencing professional studies shall be understood to be the time of commencing studies at a medical school;" the General Council thus declining to recognise the time spent in apprenticeship as any part of the legitimate curriculum which every medical student would henceforth be required to pass through. This regulation was, of course, indirectly and unintentionally, a blow at those members of the College of Surgeons and Apothecaries' Company who received large fees for taking and training apprentices, and its adoption was opposed by the represent-

atives of these bodies. In fact, in the case of the Apothecaries' Company, there was a legal difficulty in the way, as their lamented representative Mr Nussey explained when the matter was under discussion; but at a subsequent meeting, with that high-toned gentlemanly feeling for which he was conspicuous, he informed the Council that, rather than exhibit disloyalty, the Apothecaries' Company would overcome that difficulty. The vote of Mr Nussey's successor was painfully at variance with this.

It could scarcely be expected, however, that the authority of the Council would be openly defied; and yet in the regulations of the College, published in the *Lancet*, September 21, 1861, it is laid down by the College of Surgeons of England:—

“II. The following will be considered as the commencement of professional education:—1st, Attendance on the practice of an hospital, dispensary, or other public institution recognised by this College for that purpose; 2d, Instruction as the pupil of a member of one of the Royal Colleges of Surgeons in the United Kingdom, or of the Faculty of Physicians and Surgeons of Glasgow.”

A refusal to conform to the recommendations of the Council, so glaring and so defiant, perpetrated by the most powerful surgical body in the kingdom, could not, of course, be allowed to pass unnoticed. Accordingly, at the first meeting of the Scottish Branch Council held after the publication of the advertisement we have quoted, the subject was taken up, and the attention of the English Branch Council was drawn to this glaring violation of the recommendations of the Council. The letter from the Registrar of the Scottish Branch Council was laid before the English Branch Council, and by that body referred to the General Council, on the 27th December 1861.

The subject came under the notice of the Council during its late session in three forms, and at three meetings.

First, by a motion, of which Mr Syme gave early notice, to the following effect:—

“That the regulations lately issued by the College of Surgeons of England for the qualification of candidates for their license are not in accordance with the recommendations of the Medical Council, and are not such as to secure the possession by persons obtaining such qualifications of the requisite knowledge and skill for the efficient practice of their profession.”

This motion was clear, precise, and definite, and was a logical deduction from the actual state of matters; for if the Council had laid down a *minimum* of education, it is evident that anything below that minimum ought to have been regarded by that body as insufficient. But the Council was obviously unwilling to deal harshly with the College of Surgeons, and hence an amendment, less rigidly definite in its terms, was moved by Dr Allen Thomson, and seconded by Dr Sharpey,—

“That the regulations lately issued by the College of Surgeons of England for the qualification of candidates for their license are not in accordance with the recommendations of the Medical Council, and that the College of Surgeons

be requested to reconsider the grounds on which they have departed from the recommendations of the Council, and to state whether or not the regulations lately issued by the College, in reference to professional study, are intended to be merely of a temporary nature, or whether it is the intention of the college, at an early period, to bring their regulations into entire conformity with the standard recommended by the Council."

It will be thought that, considering the position in which the Council was placed, one or other of these motions might have suited all parties. If the logical conclusion at which Mr Syme's motion arrived had an unavoidable appearance of harshness, the more timid spirits in the Council might have taken refuge under the amendment of Dr Thomson, which, while it vindicated the authority of the Council, adopted the tone of expostulation or entreaty, rather than of censure towards the erring body; but no, the "Previous Question"—virtually a decision that the matter was one in which the Council should not interfere—was carried by 13 to 8. The vote is entered on the minutes (May 17, page 4), and an analysis of the majority is curious. *First*, we have three Fellows of the College of Surgeons of England; *second*, every Irish member, with the exception of Dr Leet; *third*, the representatives of Oxford, Cambridge, and Durham Universities; *fourth*, the representative of the Glasgow Faculty; this last gentleman has the singular honour of being the only Scottish member who voted in the majority; it is difficult to discover the principle which guided him, for all the professions and actings of the Glasgow Faculty should have placed him with the minority. Was the compliment of having the apprentices of members of the Faculty recognised as on a par with those of the Colleges of Surgeons, as is done in the obnoxious regulation, the sop that won over this Cerberus?

Second, But the question was not exhausted by the first day's discussion, for on the following day the reference on the subject from the Scottish Branch Council again opened it up. There was an earnest anxiety on the part of many members of the Council to save its consistency; and on this occasion Dr Thomson proposed his amendment as a substantive motion, and it was understood that the Fellows of the College of Surgeons of England who are members of the Council would not object to it. The Irish members, however, having, for some reason to themselves best known, assumed the right of patronizing the Royal College of Surgeons of England, again threw the ægis of their protection over it; and the following motion, proposed by Dr Corrigan, and seconded by Dr Stokes, was carried:—

"That it be an instruction to the Executive Committee to obtain returns of the regulations relative to Education and Examination from the several licensing bodies mentioned in Schedule A; to ascertain in what particulars the regulations of any of these bodies may differ from the recommendations of the General Medical Council; to request from those corporate bodies whose regulations so differ, such observations or explanations as they may deem fit to offer; and to submit the correspondence, with their report thereon, to the next meeting of the General Medical Council."

This motion was, however, carried only by the vote of the President.

Sir Charles Hastings and Dr Burrows, both of whom were absent from the vote of the previous day, added their names to the minority. The representative of the Glasgow Faculty seemed to have awakened from his dream, and supported the motion which, on the previous day, he opposed; as did also Mr Hargrave, the successor of poor Williams. *Eheu quantum mutatus ab illo!*

The conversion of Mr Hargrave must not only have been sudden, but very thorough; for on Tuesday, May 20th, we find him seconding a series of resolutions moved by Mr Syme, being the *third* way in which the Council were asked to consider the question.

The first of these reiterated the necessity for four years' professional study; the second excluded apprenticeship or pupilage as part of that study; the third pointed out the objectionable part of the regulations of the College of Surgeons of England; and the fourth was to the following effect:—

“That the Council having declined to notice this departure from their requirements, and having thus recognised an independent power in one of the licensing bodies, it is therefore unnecessary to take any farther steps for interpreting the educational clauses of the Medical Act.”

These resolutions obtained no great support; probably from a hope, even among the minorities in the two former divisions, that the Council might next year be induced to retrace its steps.

Having thus given a summary of the proceedings of the Council in this matter, we shall not conceal that in our opinion they have sealed at once the fate of the Council and of the Medical Act. In reviewing the proceedings of the Council in 1861, we stated that never was a body constituted with more of the semblance and less of the reality of power, and that all it had to rely on for securing the adoption of its recommendations was moral power. This one public emblem of authority has now been ruthlessly broken; henceforth every body is set free from allegiance to the Council, and allowed to do what seems right in its own eyes. Having refused to interfere in a case so well marked and decided, the Medical Council can, with no show of consistency, deal with another; the licensing boards will discover that such of them as loyally obey the behests of the Council are under-sold by others who disown its authority, and that the Council has neither the power nor the inclination to be a terror to evil-doers, nor a praise and protection to those who do well.

This session has also developed another inherent weakness in the constitution of the Council. It is obvious that there should be degrees in medicine according to the plain interpretation of the word. That is to say, that there should be higher and lower qualifications, with higher or lower education attached to each. Thus, a man who has obtained a university degree in medicine was naturally supposed, and ought to have had a more thorough academic

education than he who practised on the license of a College of Surgeons or an Apothecaries' Company. This right rule, however, was not always observed; and it is notorious that some of the highest honours of medicine have been bestowed on qualifications lower than the minimum fixed by the Medical Council for the lowest.

In the very first report on education (11th August 1859) adopted by the Council, the following passage occurs:—

“The Council, looking at the importance and complicated nature of the question, have determined to postpone the consideration of the second and third heads (II. The purely Professional Education; III. The conditions on which the higher qualifications in Medicine and Surgery should be granted). They take this course, believing that it will tend to promote the reforms indicated by the provisions and the spirit of the Act of Parliament; for time will thereby be allowed for full consideration of such important points as the assimilation, as far as may be, of the purely medical educational systems, *and the providing that the higher degrees should be distinguished by corresponding academic rank, obtained by a full and as nearly as possible equivalent education.* The Council expect that by their next meeting they will be in a position to offer their views on those questions and on others of corresponding magnitude.”

The subject, thus early mooted, has never been lost sight of by the Council. In the next session (23d June 1860), the Council in Education Committee agreed to the following resolution by a majority:—

“They would record their opinion, that it is not desirable that any university of the United Kingdom should confer a degree in medicine, whether that of Bachelor or Doctor, upon candidates who have not graduated in arts, or passed all the examinations required for the Bachelorship in Arts, or the examinations equivalent to those required for a Degree in Arts.”

Last session, Mr Syme, the representative of the University of Edinburgh, again brought the subject under discussion by moving:—

“That, while fully recognising the importance of a literary, philosophical, and scientific education as an introduction to the study of medicine, it is not expedient at present to restrict graduation in medicine to those possessed of a degree in arts, or who have passed an equivalent examination.”

This was met by Mr Teale moving that the Council reaffirm their opinion of the former year, and now extend this expression of it to the degree in surgery.

On a division, there voted for Mr Syme's motion, 1; for Mr Teale's amendment, 20.

The following month (1st August 1861), the *Senatus Academicus* of the University of Edinburgh having met, agreed, *inter alia*, to the following resolution:—

“The *Senatus* regrets that it cannot concur with the Medical Council in one of their resolutions which declares,”—and then follows the resolution as already quoted. The remainder of these resolutions go to show that the recommendations of the Medical Council are at variance with the Ordinances of the Scottish University Commissioners as confirmed by the Privy Council, and that the University prefer yielding obedience to the latter.

The resolutions, of which the one quoted above is the second, conclude as follows:—

VIII. That, in conclusion, while thus noticing, in courtesy to the Medical Council, their recommendation as to the education of medical graduates, the Senate must, with great respect, take the liberty of stating that the Council seem to have gone beyond their jurisdiction in recommending to the Scottish Universities a different plan of education and examination from that which the University Commissioners have enjoined in their Ordinances. That the Medical Council are empowered by the Medical Act to take the necessary steps, according to a certain form of procedure, to secure, on the part of all persons presenting their qualification for medical practice to the Registrar for admission in the register of legally qualified practitioners, “the possession of the requisite knowledge and skill for the efficient practice of their profession:”—[*Clause XX.*] That the Council have the right to demand this much of all graduates and licentiates of Universities and Medical Corporations alike, and no more: But that they are not empowered to demand or recommend that, while the licentiates of corporations shall be qualified to that extent, graduates of Universities shall be qualified in a higher degree; and that the duty of fixing what that superiority should be belongs to the authorities of the Universities.

The doctrine thus enunciated was to a certain extent new. In 1859, it is plain by the unanimous adoption by the Council of the clause in the Education Report which has been quoted, that no such opinion was entertained by any of the members. In 1860, indeed, when the resolution also quoted was adopted, Dr Storrar intimated this view, and pledged himself to obtain an opinion of counsel on the subject. In 1861, it was understood such an opinion had been obtained for the University of London, the body which Dr Storrar represents in the Council, and that it awarded to the Council the power of regulating the higher as well as the lower degrees in medicine.

At a meeting of the English Branch Council, held 27th December 1861, Dr Storrar carried a motion instructing the solicitors of the Council to prepare a case, under revision of a committee, to determine how far the Council have power to lay down varied schemes of education corresponding to varied degrees in medicine. This was manifestly an irregular proceeding; such an opinion was not wanted for the guidance of the Branch Council seeking it; the case, moreover, was a peculiarly Scottish one, for in all other divisions of the kingdom the education of university graduates was sufficiently high, and in Scotland alone did the universities seek to come into competition with the colleges. Accordingly, on the 11th Jan. 1862, the Scottish Branch Council adopted the following resolution:—

“That in the opinion of the Scottish Branch Council, while it is quite regular for any Branch Council to take a legal opinion on any point required for its own guidance, in regard to matters coming

properly within its jurisdiction, it is altogether *ultra vires*, and an invasion of the rights of the General Council to take one on a matter which concerns the actings of the General Council."

The case, prepared under the direction of the English Branch Council, was submitted to the General Council; and the thorough and complete alteration of it in every part was the best lesson that could be given of the impropriety of the whole proceeding, while the refusal by the Council to entertain the kindly and well-meant *ex post facto* sanctioning legislation of Dr Acland was very significant.

This, however, by the way.

The opinion has also now been obtained from Sir Roundell Palmer and Mr Selwyn, and is decidedly unfavourable to the General Council having the power to lay down one style of education for the lower, and another for the higher degrees of medicine. The effect of this is obvious. Should there be universities who look more to the number than to the character of their graduates, and who may be willing or anxious to enter into a competition with the colleges, it will be easy for them, by their representatives in the Council, to assist in raising the minimum standard, below which no loyal body can fall. Limiting, then, their own requirements to this minimum standard, they may offer the high-sounding distinction of an academic degree on terms not one whit higher than those on which qualifications usually reckoned as the lower can be obtained; and this evil the Medical Council is powerless to remedy.

On the whole, looking at how little that body has power to do, and how much less it seems inclined to do, and having regard to the whole state of the profession, we think that the sooner it is abolished the better.

We see a new Medical Reform Bill is to be prepared under the auspices of the Council. Will it go to the root of the matter? Will it sweep away the General Council, with its cumbrous and expensive machinery? Will it make provision for securing the *bona fide* attendance of students at their classes? Will it really regulate and supervise the examinations? Will it, in short, be aught else than a mockery, a delusion, and a snare?

Let the profession rouse itself, and insist on real reform. Let registration be carried on under government authority. Let government see to the efficient inspection of our schools and examinations. Let pretenders to medical titles be punished.

This is all in medical reform which the profession and the public require, and nothing short of this should they demand.